

Atty Dkt No. 8325-0007.01 (S7-US2) USSN: 09/925,796

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450 on

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

Confirmation No.: 5123

PATENT

CASE et al.

Art Unit: 1631

OCT 1 7 2003 TECH CENTER 1600/2900

Serial No.: 09/925,796

Filing Date: August 9, 2001

Examiner: J. BRUSCA

Title:

FUNCTIONAL GENOMICS USING ZINC FINGER PROTEINS

AMENDMENT TRANSMITTAL LETTER

Commissioner for Patents PO Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing is an amendment in the above patent application in response to the Office Action of August 13, 2003.

- Applicants request an extension of time for months. Enclosed is a check to cover the \$ fee.
- No additional fee is required.
- <u>X</u> Also enclosed: Information Disclosure Statement; Terminal Disclaimer; Postcard.

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USSN: 09/925,796 PATENT

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OCT 1 7 2003

ECH CENTER 1600/2900

No. of Claims After Amendment		Most Claims Previously Paid		Extra Claims		Additional Fee			
A. Total									7
Claims	53	-	57	=	0	х	\$18	=	so ʻ
B. Ind. Claims	2	-	3	=	0	Х	\$84	=	0
C. If amended to contain multiple dependent claims, add 280 \$280								=	\$0
D. Total Amendment Fee (Total of A, B & C)								=	0
E. If small entity, 50% reduction of Total Amendment Fee (50% of D)								=	0
F. Total Amendment Fee (D minus E)								=	\$0

X A check for \$290 to cover the fee for the Information Disclosure Statement (\$180) and the fee for the Terminal Disclaimer (\$110) is attached.

___ Charge \$ to Deposit Account No. 18-1648.

The Commissioner is hereby authorized to charge any fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21 which may be required by this paper, or to credit any overpayment, to Deposit Account No. 18-1648.

Respectfully submitted,

Date: 10/06/03

By: 10/450

Dahna S. Pasternak Registration No. 41,411

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